PART B - FEE(S) TRANSMITTAL

Complete and send this form, together w.i.n applicable (ee(s), to: Mall Commissioner for Patents P.O. Box 1450
Alexandria, Viginia 22313-1450
or Fax (571)-277-2885

DISTRUCTIONS: This form should be used for transmitting the ISSUE FEE and FUBLICATION FEE (if required). Blocks I through 5 should be completed where proporties. All flowers between including the Patent, advance orders and notification of maintenance fees will be mailed 50 the current correspondance address as indicated unless corrected below flowers or the patent of the patent

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23122 7590

08/30/2007

RATNERPRESTIA

P O BOX 980

VALLEY FORGE, PA 19482-0980							
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		FTORNEY DOCKET NO.	CONFIRMATION NO.	
10/506,886 04/27/2005			Takumi Ikeda		MAT-8594US	6694	
TITLE OF INVENTION: OPTICAL OUTPUT DEVICE, RELAY DEVICE, AND PROGRAM CONTROLLING OPTICAL OUTPUT DEVICE							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	E TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1,440.	\$300	\$0	\$1,755.	11/30/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
MULLEN, THOMAS J		2612	340-815400	•			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 			2. For printing on the patent front page, list , RatnerPrestia				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm thaving as a member a registered attorney or gazel and the name of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed in the name is 3				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty				
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.							
(A) NAME OF ASSIGNEE (R) RESIDENCE: (CITY and CT ATE OR COLD TO VO							
Matsushita Electric Industrial Co., Ltd., Osaka, JAPAN							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee	o small entity discount p		A check is enclosed.	A check is enclosed.			
Advance Order - #	of Copies 5	crmitted)	Payment by credit card. Form PTO-2038 is attached.				
MA Advance Order - # of Copies 5 On the Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 18-0.350 (enclose an extra copy of this form). 5. Change In Entity Status (from status indicated above)							
a. Applicant claims	us (from status indicates SMALL ENTITY state	i above) s. See 37 CFR 1 27	b. Applicant is no lon	non eleimine Childri			
NOTE: The Issue Fee and interest as shown by the re	Publication Fec (if requests of the United Sta	uired) will not be accepte	d from enyone other than t	ne applicant; a register	ed attorney or agent; or t	FR 1.27(g)(2). he assignee or other party in	
Authorized Signature		-1601	21				
100	Muer C	1000	X-	Date Oct	ober 29, 2007		
Typed or printed name			/	Registration No.	34,515		
This collection of informs an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	tion is required by 37 C lality is governed by 35 application form to the ons for reducing this but rginia 22313-1450. DC 3-1450.	FR 1.311. The information U.S.C. 122 and 37 CER. USPTO: Time will any den, skould be sent to the NOT SEND BEES OR	is required to obtain or r 1.14. This collection is est depending upon the indive e Chief Information Office COMPLETED FORMS TO	ctain a benefit by the imated to take 12 min idual case. Any comm r, U.S. Patent and Tra	oublic which is to file (an utes to complete, including the ents on the amount of ti- demark Office, U.S. Dep END TO: Commissioner	d by the USPTO to process) ag gathering, preparing, and me your require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	
Under the Paperwork Red	uction Act of 1995, no	ersons are required to re-	spond to a collection of inf	ormation unless it disp	lays a valid OMB contro	number.	